

Tennessee Department of Safety
1150 Foster Ave.
Fiscal Division – Cashier's Office
Nashville, Tennessee 37210



APPLICATION FOR INTRASTATE AUTHORITY

ACCOUNT CODE 280.00

One Time Registration Fee	\$50.00
Name Change Fee (if applicable)	\$25.00
Total # of Vehicles <input type="checkbox"/>	
@ \$8.00 Per Vehicle	\$
Total Amount Due	\$

FEIN/SSN: _____ U.S.DOT#: _____ MC DOCKET#: _____

Type Of Authority Applying For In Accordance With T.C.A. 65-15-107, 65-15-109, & 65-15-110

_____ General Freight _____ Household Goods _____ Contract Hauler, No Commercial Value
_____ Bus/16 or More _____ Bus/15 or Less _____ GVWR – Gross Vehicle Weight rating under 10,000 lbs
_____ Mobile Homes

Hazardous Materials:

_____ Carrier will haul NO hazardous materials
_____ Carrier hauls HM, which requires \$1 million limit of liability
_____ Carrier hauls HM, which requires \$5 million limit of liability

Applicant Name: _____

DBA (if applicable): _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Fax Number: _____

Company Structure (Check One)

_____ Individual _____ Partnership _____ Limited Liability Company
_____ Corporation _____ Year Incorporated _____ State of Incorporation

List name of partners or officers:

Name: _____ Title: _____
Name: _____ Title: _____
Name: _____ Title: _____

Tennessee Process Agent – Must be Tennessee resident (See attached sheet)
Submit current Form BOC – 3 **OR** a letter from the actual individual agent

Section I - Insurance Requirements

FORMS MUST BE SUBMITTED BY THE INSURANCE CO.

Liability Minimum Liability Coverage in the amount of **\$300,000** if gross vehicle weight rating is less than 10,000 pounds or **\$750,000** if gross vehicle weight is 10,000 pounds or more

- Form **BMC-91X** (If you have **FMCSA Authority** and are based in Tennessee)
- Form **E** along with a **MCS 90 Insurance Endorsement (Intrastate-TN - Based) OR (Intrastate- Non-TN based)**
- Form **H - Cargo** (Minimum of \$5,000) - **Intrastate-General Freight & Towing & Wrecker Service**
- Form **E** along with a **MCS 90 Insurance Endorsement - Private Carrier**
- **Passengers Carriers- (Form E & MCS-90)**
 - ** 16 or more passengers (\$5,000,000)
 - ** 15 or less passengers (\$1,500.00)
- Name of Insurance Co. _____ Name of Insurance Representative _____ Phone # of Ins .Co _____
- Fax # of Ins. Co. _____ and/or E-mail address _____

Section II – All Applicants having FMCSA (Interstate) Authority must complete the following:

- If you hold a Single State Registration Receipt (SSRS) from a state other than Tennessee, please send a copy of your current SSRS Receipt and any Supplemental Receipts. This receipt must cover all vehicles operating in Tennessee Intrastate Commerce.
- A copy of the current year BOC –3 form

Section III – All Applicants who travel solely in Intrastate Commerce must complete the following:

- Each vehicle you operate in intrastate commerce must have a stamp for each calendar year of operation
 - \$8.00 per vehicle
 - This intrastate permit card must be shown to any law enforcement officer upon request
 - Renewal forms for the annual intrastate permit card will automatically be mailed to you
- A copy of the current year BOC –3 form or a letter from the actual individual agent

Section IV – Penalty of Perjury Statement

Under penalty of perjury the undersigned declares that the information on this application is true and correct and that I am authorized to execute and file this document on behalf of the above applicant. .

Signature: _____ Title: _____ Date: _____

Section V – Remittance

- Application must accompany fee
- Enclose a check or money order (**No Cash**) made payable to:

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